

Open Door Women's Clinic

410 East Sixth Avenue
Tallahassee, FL 32303
(850) 222-7077

Board of Directors

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Kiera Sheedy Camron
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Leon County
Division of Housing & Human Services
918 Railroad Avenue
Tallahassee, FL 32310

March 12, 2004

Dear Ms. Murphy,

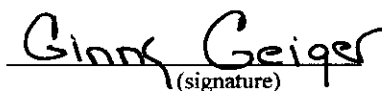
Open Door Women's Clinic as lead agency for the Choose Life License Plate Grant Program for 2004/2005 is sending the following grant applications for this years monies. Below are the following agencies that are participating and their contact person. If you have any questions you may contact me at 222-7077.

Sincerely,



Eileen Schamber
Executive Director

A Women Pregnancy Center
Ginny Gieger, Ex. Director
111 S. Magnolia Dr., Ste. 38
Tallahassee, FL 32301



(signature)

Open Door Women's Clinic
Eileen Schamber, Ex. Director
410 E. Sixth Ave.
Tallahassee, FL 32303



(signature)

**LEON COUNTY CHOOSE LIFE LICENSE PLATES
GRANT PROGRAM
2004/05 GRANT APPLICATION**

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AGENCY'S LEGAL NAME Open Door Women's Clinic

AGENCY CONTACT PERSON Eileen Schamber

STREET ADDRESS 410 East Sixth Avenue

MAILING ADDRESS 410 East Sixth Avenue

CITY Tallahassee STATE FL

ZIP 32303

PHONE NUMBER (850) 222-7077 FAX NUMBER (850) 412-0019

E-MAIL ADDRESS odwc_227@hotmail.com

*The following are the **minimum legal requirements**. An agency must meet these criteria to qualify for funding. Please provide the requested information below:*

1. Registration with the U. S. Department of Treasury, Section 501 (c) (3), Internal Revenue Service Code, for exempt status. Tax Exempt # 59-3577270
2. Registration with the Florida Department of Agriculture and Consumer Services, pursuant to Chapter 496. F.S. Registration # SC05464
 - If your organization is exempt, as provided for in section 496.406, F.S., a copy of your exemption letter must be attached to this application.
 - If your organization is automatically excluded, pursuant to Section 496.403, F.S., check ☐.
3. Your organization must be registered as a non-profit corporation with the Florida Department of State pursuant to Chapter 617. F.S. Registration # N99000001289
4. If your organization has a physical presence in Florida, you must be registered with the Florida Department of Revenue pursuant to Chapter 212.08. F.S. State Sales Tax Exempt # 47-00-044671-56C

Lynn T. Mangas
CHIEF VOLUNTEER OFFICER
(Board President or Chair Signature Required)

3/12/04
DATE

Eileen Schamber
CHIEF PROFESSIONAL OFFICER
(Director, Executive Director or President Signature Required)

3/12/04
DATE

FORM TWO: ORGANIZATIONAL REPRESENTATION

FORM TWO: ORGANIZATIONAL REPRESENTATION

List the number of the agency's clients served, Board of Directors, and professional and support staff composition.

Totals for Calendar Year 2003

Totals

Clients Served 821

Board of Directors 6

Professional Staff 4
(employees)

Support Staff 92
(volunteers)

FORM THREE: ORGANIZATIONAL OVERVIEW

Narratives should be written in concise manner. If necessary, attach one additional sheet.

1. Please state the agency's overall mission and purpose.

Open Door Women's Clinic, Inc. seeks to empower women to choose life for their babies and to embrace healthy lifestyle choices that benefit them physically, emotionally, morally and spiritually. Open Door Women's Clinic, Inc. maintains that all human life is sacred, from conception to natural death. The clinic promotes chastity and neither offers nor refers for contraception or abortion; through our relationships with the women we serve and our interaction with the community, Open Door Women's Clinic, Inc. will always be consistent with the Magisterial teachings of the Roman Catholic Church, specifically following the encyclical *Humanae Vitae*.

2. Please identify goals and objectives planned for your 2003/04 fiscal year (current fiscal year).

- ▶ Implementation of one major yearly fund-raising event
- ▶ Staff expansion
- ▶ Providing more professional training for staff
- ▶ Providing more training for lay counselors in presenting only life-affirming options
- ▶ Implementation of new administrative systems

3. Please identify goals and objectives planned for your 2004/05 (next year).

- ▶ Explore expansion goals
- ▶ Reassess fund-raising plan
- ▶ Explore implementing second major yearly fund-raising event
- ▶ Implementation of structured continuing education program of lay volunteers

FORM FOUR: STATEMENT OF ACTIVITIES

- 1. Please highlight successful collaborative efforts that your agency has conducted or is presenting participating in during this current fiscal year.**

Open Door Women's Clinic, Inc. works extensively with other agencies and groups in the community to provide a more comprehensive service to the women we serve. For material assistance and support, the Pregnancy Help and Information (PHI) Center is an agency to which we very frequently refer clients. Likewise, the PHI Center staff often sends clients to Open Door Women's Clinic, Inc. for free medical and counseling services. The close relationship between Open Door Women's, Inc. and Good News Outreach (GNO) enables us to attend well to immediate needs, such as shelter and food, of clients in crisis. Open Door Women's Clinic, Inc. also makes professional referrals to counselors and physicians, several of whom are willing to see our referrals on short notice and for reduced fees.

- 2. Identify agency fund-raising plans such as various activities to generate funds to support the agency and its program delivery structure.**

- ▶ Annual Golf for Life Tournament
- ▶ Sale of roses on Mother's Day
- ▶ Sacred Heart Home School Association Read-a-Thon
- ▶ Quarterly newsletter and special mailings
- ▶ Florida Knights of Columbus Charities Grant

- 3. Please list all formal grants and in-kind donations.**

- ▶ Florida Knights of Columbus Charities Grant
- ▶ Miscellaneous grant applications
- ▶ Medical supplies
- ▶ Office supplies
- ▶ Baby clothing and furniture
- ▶ Maternity clothing
- ▶ Building maintenance and improvements

- 4. Do you participate in any pro-abortion activities?** Yes _____ No X _____

- 5. Do you charge women for services received?** Yes _____ No X _____

FORM FIVE: PROGRAM SUMMARYAGENCY NAME Open Door Women's ClinicPROGRAM NAME Open Door Women's ClinicPROGRAM SERVICE Free counseling, support, and healthcare services for pregnant women.**A. PROGRAM RESOURCES**

	2003/04 Actual	2004/05 Projected
Total Program Budget	\$130,000	\$145,000
Program Staff (FTE)	#2.7	#3.0
Program Volunteers (value)	\$150,000	\$155,000
Program In-Kind Donations	\$13,000	\$16,000

B. PROGRAM DESCRIPTION**1. Narrative Description of Program:**

Succinctly describe the program that will utilize these funds, including types of services provided, how and by whom (staff, volunteers, etc.) they are provided, and any eligibility requirements for clients.

Open Door Women's Clinic, Inc. offers a variety of free counseling, support and healthcare services to pregnant women, and all women are eligible. Each service is provided by well-trained and experienced staff or volunteers. As the mission statement of the clinic explains, our efforts are directed towards "empower[ing] women to choose life for the unborn babies and [to] embrace healthy lifestyles choices that benefit them physically, emotionally, morally and spiritually." As a means to these ends, staff and volunteers provide free medical services such as pregnancy testing and ultrasound, counseling services such as lay and professional counseling, information-sharing and educational materials and extensive support services. Our professional association with many agencies and groups in the community enable us to provide extensive referrals for such needs as housing, employment, food and basic necessities, education and ongoing healthcare, among others. We always present adoption in a positive light and make referral for adoption facilitators whenever clients request this information. We also emphasize a continuing relationship between client and staff, knowing that many sources of support can greatly benefit clients in need. Working with clients throughout their pregnancies and addressing their needs individually are important parts of reaching our goal of providing practical assistance, encouragement and love to women in our community so that they feel able to carry their babies to term.



Florida Department of Agriculture & Consumer Services
CHARLES H. BRONSON, Commissioner
Tallahassee, Florida

Attachment # 5
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March 20, 2003

Division of Consumer Services
2005 Apalachee Pkwy
Tallahassee, Florida 32399-6500
Phone: 1-800-HELP-FLA
URL: <http://www.800helpfla.com>

Refer To: CH5464

GOOD NEWS FOSTER HOME, INC.
242 LAFAYETTE CIRCLE
TALLAHASSEE, FL 32303

RE: GOOD NEWS FOSTER HOME, INC.
REGISTRATION#: CH5464
EXPIRATION DATE: March 28, 2004

Dear Sir or Madam:

The above-named organization/sponsor has complied with the registration requirements of Chapter 496, Florida Statutes, the Solicitation of Contributions Act. A COPY OF THIS LETTER SHOULD BE RETAINED FOR YOUR RECORDS.

The Solicitation of Contributions Act requires an annual renewal statement to be filed on or before the date of expiration of the previous registration. The Department will send a renewal package approximately 60 days prior to the date of expiration as shown above.

Thank you for your cooperation. If we may be of further assistance, please contact the Solicitation of Contributions section.

Sincerely,

CHARLES H. BRONSON
COMMISSIONER OF AGRICULTURE

Toya Peters

Toya Peters
Regulatory Consultant
850-410-3761 / 800-435-7352(Florida Only)
peterst@doacs.state.fl.us